

**Department of Criminal Justice Services
Victims Services Section
Local Sexual Assault Grant Program (VOCA and State Funds)**

Monitoring Report

Program Name _____

Primary Service Area(s) _____

Grant Number _____ Award Amount _____

Staff Present _____

Monitor Name _____

Date of Monitoring Visit _____

Reporting Requirements and Grant Conditions

| | | Satis- factory | Unsatis- factory | Comment |
|---|--|-------------------|---------------------|---------|
| | | | | |
| Are progress and financial reports filed within 12 working days of the end of each quarter? | | | | |
| | | | | |
| Are special conditions submitted in a timely manner? | | | | |
| | | | | |
| Are copies of the quarterly reports, grant application, and Statement of Grant Award on file at the program office? | | | | |
| | | | | |
| Are client files, books, records, and other documents relative to this grant retained for three years? | | | | |
| | | | | |
| Does the grantee have accounting records available that match the grant allocation of funds? | | | | |
| | | | | |
| Does the grantee have a current independent financial audit on file at the project office? | | | | |

Reporting Requirements and Grant Conditions (continued)

| | | Satis- factory | Unsatis- factory | Comment |
|---|--|-------------------|---------------------|---------|
| | | | | |
| Are grant funds used only for direct services? | | | | |
| | | | | |
| Are grant-funded staff involved in any of the following activities: crime prevention, lobbying, legislative advocacy, perpetrator rehabilitation, needs assessments, surveys, manuals, protocols, or fundraising? | | | | |
| | | | | |
| Does the program have written brochures? If developed with grant funds, do they bear the required statement: "This project was supported by the DCJS award # _____ from funds made available to Virginia by the Office for Victims of Crime of the Office of Justice Programs, U.S. Department of Justice"? | | | | |
| | | | | |
| Are property records kept on grant-funded equipment? Do records include serial number, title, acquisition date, funds supporting purchase, location, use, condition, and disposition data? | | | | |
| | | | | |
| Are grant-funded membership dues in the name of the organization? | | | | |
| | | | | |
| Does the program maintain cooperative agreements with appropriate agencies? | | | | |
| | | | | |
| Does the grantee have a written confidentiality policy to protect information provided by victims to program staff? | | | | |
| | | | | |
| Are services made available to federal crime victims? | | | | |

Program Management

| | | Satisfactory | Unsatisfactory | Comment |
|---|--|--------------|----------------|---------|
| | | | | |
| Are program services evaluated regularly? | | | | |
| | | | | |
| Does the program have internet access and email capability? | | | | |
| | | | | |
| Does the program use, or have the capability to use, VAdata? | | | | |
| | | | | |
| Does the program have a mission statement? | | | | |
| | | | | |
| Does the program have articles of incorporation? | | | | |
| | | | | |
| Does the program have documentation showing non-profit status? | | | | |
| | | | | |
| Does the program have a working Board of Directors? How many current members? How often do they meet? | | | | |
| | | | | |
| Does the project receive/seek additional funding from other sources? | | | | |

Human Resource Management

| | | Satisfactory | Unsatisfactory | Comment |
|---|--|--------------|----------------|---------|
| | | | | |
| Are there personnel files for all staff members? Do they include position descriptions? | | | | |
| | | | | |
| Is staff performance evaluated annually? | | | | |
| | | | | |
| Does the program have an organizational chart? Are lines of supervision clear? | | | | |
| | | | | |
| Are there written hiring and firing practices? | | | | |
| | | | | |
| Does the program have a compensatory time policy? | | | | |
| | | | | |
| Are time/attendance and training records kept for all grant-funded staff? | | | | |
| | | | | |
| Are staff trained regularly and adequately? (initial and continuing) | | | | |
| | | | | |
| Have all grant-funded staff attended Basic Program Management? | | | | |
| | | | | |
| Does the program use volunteers? (number of hours and number of FTE) | | | | |
| | | | | |
| Are they trained regularly and adequately? (initial and continuing) | | | | |
| | | | | |
| Is volunteer performance evaluated annually? | | | | |

Review of Grant-Funded Staff

Name _____

Title _____

Hours Per Week _____

Annual Salary _____

Name _____

Title _____

Hours Per Week _____

Annual Salary _____

Name _____

Title _____

Hours Per Week _____

Annual Salary _____

Name _____

Title _____

Hours Per Week _____

Annual Salary _____

Service Objectives (_____ months reported on to date)

| | | Target | Status | Comment |
|---|--|--------|--------|---------|
| Number of Victims Served | | | | |
| | | | | |
| Number of Hotline Calls | | | | |
| | | | | |
| Crisis Intervention | | | | |
| | | | | |
| Follow-up Contact | | | | |
| | | | | |
| Emergency Assistance: Shelter/ Safe House | | | | |
| | | | | |
| Emergency Assistance: Financial Assistance | | | | |
| | | | | |
| Emergency Assistance: Protection | | | | |
| | | | | |
| Assistance with Compensation Claims | | | | |
| | | | | |
| Information and Referrals: in Person | | | | |
| | | | | |
| Information and Referrals: by Telephone | | | | |
| | | | | |
| Personal Advocacy: Companion Service | | | | |
| | | | | |
| Personal Advocacy: Other | | | | |
| | | | | |
| Criminal Justice Support/ Advocacy | | | | |
| | | | | |
| Group Support (optional) | | | | |
| | | | | |
| Therapy (optional) | | | | |
| | | | | |

Quarterly Report Notes

Other Objectives (as submitted by the grantee)

[illegible]

Persons Interviewed

Director of program
Grant-funded staff
Member, Board of Directors (if available and requested by grant monitor)

Documents Reviewed

Quarterly progress reports
Quarterly financial reports
Grant application
Statement of award
Accounting records
Annual financial audit
Program brochures
Property records
Cooperative agreements
Confidentiality policy
Mission statement
Articles of incorporation
Non-profit status document
Board of Directors membership list and meeting minutes
Personnel files
 Position descriptions
 Annual evaluations
 Time/attendance records
 Training records
Organizational chart
Personnel policies
 Hiring and firing practices
 Compensatory time and other leave practices
 EEO, non-discrimination, and drug-free workplace documents
Client records